

PTO/SB/00 (10-01)
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REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL. Address to: Commissioner for Patents Box RCE Washington, DC 20231	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Application Number</td> <td>10/049,787</td> </tr> <tr> <td>Filing Date</td> <td>February 15, 2002</td> </tr> <tr> <td>First Named Inventor</td> <td>Niederreder</td> </tr> <tr> <td>An Unit</td> <td>1732</td> </tr> <tr> <td>Examiner Name</td> <td>Shaw</td> </tr> <tr> <td>Attorney/Agent Number</td> <td>Niederreder</td> </tr> </table>	Application Number	10/049,787	Filing Date	February 15, 2002	First Named Inventor	Niederreder	An Unit	1732	Examiner Name	Shaw	Attorney/Agent Number	Niederreder
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Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted by the USPTO) on page 2.

1. **[Submission required under 37 CFR 1.114]**

a. ☐ Previously submitted

i. ☐ Consider the amendment(s)/reply under 37 CFR 1.116 previously filed on _____
 (Any unentered amendment(s) referred to above will be entered)

ii. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____

iii. ☐ Other _____

b. ☐ Enclosed

i. ☒ Amendment/Reply

ii. ☐ Affidavit(s)/Declaration(s)

iii. ☐ Information Disclosure Statement (IDS)

iv. ☐ Other Petition under Rule 136(a) and Rule 17(a)(1)

2. **[Miscellaneous]**

a. ☐ Suspension of action on the above identified application is requested under 37 CFR 1.103(e) for a period of _____ months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(a) required)

b. ☒ Other 2 month extension

3. **[Fees]** The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.

a. ☒ The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. 03 2468

i. ☒ RCE fee required under 37 CFR 1.17(e)

ii. ☒ Extension of time fee (37 CFR 1.136 and 1.17)

iii. ☐ Other _____

b. ☐ Check in the amount of \$ 770.00 enclosed

c. ☐ Payment by credit card (Form PTO-2038 enclosed)

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

Name (Print/Type)	William Collard	Registration No. (Attorney/Agent)	38,411
Signature	<i>William Collard</i>	Date	May 10, 2004

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this paper or fee is being FAXED TO Examiner Shaw at (202) 724-1111 on May 10, 2004

William Collard
William Collard

PAGE 2/27 * RCVD AT 5/10/2004 7:15:56 PM [Eastern Daylight Time] * SVR:USPTO-EFXXF-1A * DNIS:8729311 * CSID:15163659805 * DURATION (mm:ss):08:40

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01 FC:1801 770.00 DA
02 FC:1252 420.00 DA